Statement of Organization - Candidate Committee

Amo	endmen	t		
	Yes		No	

Use this form to create a new or update an existing candidate committee.

This form must be 1. Committee Inf	e accompanied by forms	CRO-3100 and C	RO-3500 (when am	ending, c	only re-submit if	applicable).	
a, Full Name	ormation				c. ID Numbe		
	***************************************				c. ID Numbe	r e	
ROGER	BO RIC	HARD					
b. Mailing Address (i	BO RIC Include City, State and Zip Co	ode)			d. Date Orga	nized	
240 D	ixon ROA, BORD, N.C.	D			1-2	-14	
FILEN	BORD NICE	28040			e. Phone Nur	nhor.	
ELLE					4 -		
					453	0-10815	
2. Candidate Info	ormation	2 的影響		Candi	date's Primary Co	ommittee	
a, Foll Name			e. Candidate ID Num	ber	f. Party Affil	iation	
PALER	BO RECUAR	0			/ · · · · · · ·		
h Mailing Address (i	BO RICHAR Include City, State, and Zip C	(ada)	g. Office Sought	(Indicate Non-partisan if appli			
240 DIX 0		odej	g. Office Sought				
		21.0					
ELLENGO	d, Email Address	040			1. v . v .		
c . Phone Number	d, Email Address		h. Next Election Year		i. Jurisdiction		
453-0815							
Email copy of	f notices						
3. Treasurer Info		v4:	4. Custodian of Books Information				
a. Full Name			a. Full Name				
ROGER BO	RICHARD Include City, State, and Zip C	and the second					
b. Mailing Address (i	nclude City, State, and Zip C	ode)	b. Mailing Address (i	nclude Cit	y, State, and Zip Co	rde)	
SAME			en entretti en entre i igrani entretti entretti entretti entretti entretti entre				
, .							
c. Phone Number	d. Email Address		c. Phone Number	d Emai	l Address		
	u. Eman Address		C. Phone Number	U. Emai	Address		
453-0815							
I prefer to recei	ve notices by email	☐ Yes ☐ No	□ Email copy	of notic	es		
	surer Information	Add	6. Account Inform		(incl. CRO-3500)	Add	
a, Full Name		Remove	a. Financial Institutio	n Full Nar	ne	Remove	
b. Mailing Address (i	nclude City, State, and Zip C	ode)	b. Purpose				
c. Phone Number	d. Email Address		c, Account Code	ld Trong			
c. Phone Number	u. Eman Address		c. Account Code	d, Type			
☐ Email copy	of notices						
CERTIFICATIO				- /			
	Committee or Fund is in						
	he NC General Statutes a			th prohib	ited or other non-	-disclosed funds.	
I further certify	that this report is complet	te, true and correct	ct.				
2 (- 2 0		1	3	
KOGER B	O RICHARD ated Name of Signer	Ruger	éc Rohad		1-0	2 - 14 Date	
Prin	ned Name of Signer	Sı	gnature of Appointed Tre	casurer		Date	



North Carolina

State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director 4105 @ 0 MAL

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:		
Candidate Name:	ROGER BO RICHARD	
Freasurer Name:	Duncan Edwards	
Freasurer Address:	722 Duncan Road	
(include city, state, & zip)	Rutherfordton NC 28139	
	020 > 6 0102	
Treasurer Phone:	828-245-8692	

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

1-09-14 Date Signed

Rogen Be La Cardidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

FILED BY: ROLER BO RICHARD Committee Name: SAME Treasurer Name: 240 DIXON ROAD Treasurer Address: ELLENBORD, N.C. 28040 (include city, state, & zip) 453-0815 Treasurer Phone: Check One: I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports. THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE. I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required. Roger to Like

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.